# FORM D Wall Processing व्यक्त होता

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

JUN () G YOUR PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Estimated average burden hours per response. . . . . 16.00 SEC USE ONLY NOTICE OF SALE OF SECURITIES

OMB Number

DATE RECEIVED

Expires:

Washington, DC 104

Name of Offering ( check if this is an amendment and name has changed, and indicate change.	)
Advanced Equities iSkoot Investments I, LLC /Offering of Investor Member Interests	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section	n 4(6) ULOE
Type of Filing: New Filing Amendment	A ARTHUR ARTIN AND A REPORT OF A STATE AND A STATE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	08047515
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Advanced Equities iSkoot Investments I, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Co	nde) Telephone Number (Including Area Code)
311 South Wacker Drive Suite 1650 Chicago IL 60606	312-377-5300
Address of Principal Business Operations (Number and Street, City, State, Zip C (if different from Executive Offices)	ode) Telephone Number (Including Area Code)
Same	Same
Brief Description of Business	
Investment in securities of late-stage, privatley held, technology-based product and se	rvice companies. PROCESSED
Type of Business Organization	-
	ther (please specify): TJUN 1 2 2008
business trust limited partnership, to be formed Limited	ed Liability Company
Month Year	THOMSON REUTERS
Actual or Estimated Date of Incorporation or Organization: 014 018 Actual	Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction)	
CN tot Canada, PN tot Other tolerga jurisdiction/	de

### GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in rel:ance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A BASIC IDENTIFICATION DATA		<b>建设的基础</b> 的
2. Enter the information requested for the following:		
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>		
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10</li> </ul>		
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing</li> </ul>	g partners of partne	rship issuers; and
<ul> <li>Each general and managing partner of partnership issuers.</li> </ul>		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director 💟	General and/or Managing Partner
Full Name (Last name first, if individual) ADVANCED EQUITIES ISKOOT MANAGEMENT CORPORATION		
Business or Residence Address (Number and Street, City, State, Zip Code) 311 South Wacker Drive Suite 1650 Chicago IL 60606		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		101000000000000000000000000000000000000
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Cowner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director [	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director [	General and/or Managing Partner
Ful. Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director [	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		<u> Andrews</u>
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	,,,,	
Business or Residence Address (Number and Street, City, State, Zip Code)		

	4. 传播			Ø}√B≍ IÑ	FORMATIC	N'ABOUT	OFFERIN	G. P. L.	r na Es			
<ol> <li>Has the</li> </ol>	issuer sold	, or does th	e issuer in	tend to sell	to non-ac	credited in	vestors in	this offeri	ng?		Yes [	No <b>⊠</b>
i. itas iiic	issuel solu	, or does th			Appendix,						E	121
2. What is	the minim	um investm									s (1)	
(1) The minimum											Yes	No
		permit joint									<b>X</b>	
commis If a pers or states	sion or sim on to be lis s, list the na	ion request ilar remuner ted is an ass ime of the b you may se	ration for so ociated per roker or de	olicitation or son or ager aler. If mo	of purchases at of a broke re than five	rs in conne er or dealer (5) person	ction with : registered s to be liste	sales of sec with the Si d are assor	urities in th EC and/or	ie offering. with a state		
Full Name (	Last name	first, if indi	vidual)			-						
Durings	Daridanas	A d d ==== (N)		Street Ci	ni Ctota 7	n Code)		<del></del> ,				
Business or 311 South V		-				ip Code)						
Name of As				0, 12 0000			<del></del>	<del></del>	······································		<del> </del>	
Advanced I	Equities, In	c.										
States in WI	nich Persor	Listed Has	Solicited	or Intends	to Solicit F	urchasers						
(Check	"All State:	s" or check	individual	States)					•••••		☐ All	States
AL	ĀK	AZ	AR	[CA]	CO	OT]	DE	DC	FL	GA	HI	[ID]
IL	N N	[IA]	KS	KY	LA	ME	MD	MA	MI	MN	MS]	MO
MT	NE	NV	NH	נא	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{WV}$	WI	$\overline{WY}$	PR
Full Name ( Business o				d Street, C	ity, State, 2	Zip Code)				*****		
Name of As	ssociated B	roker or De	aler									
States in W	hich Perso	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers					<u>-</u>	
(Check	: "All State	s" or check	individual	States)	**** **********************************					***************************************	☐ Al	l States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NI	NM	NY	NC	ND	ОН	OK	OR	PA
RI	(\$C)	SD	TN	TX	UT	VT	VA	WA	[wv]	WI	<u>[WY]</u>	PR
Full Name	(Last name	first, if ind	lividual)						<u> </u>			
Business of	r Residenc	e Address (	Number ar	nd Street, C	City, State,	Zip Code)						
Name of A	ssociated E	Broker or De	aler						· .			
Ctatas in 11	high Dage	n Listed Ha	e Colinitad	Lor Intend	e to Solicit	Purchacer						
		n Listed Ha									. [] A	ll States
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IL NOT	[IN]	IA DIV	[KS]	KY	LA	ME	MD	MA ND	[MI]	MN OK	MS OR	MO
MT RI	NE SC	NV SD	NH) TN	NJ TX	NM UT	NY VT	NC VA	WA	OH WV	WI	WY	PA PR

<u>.</u> :

# C OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS.

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	<u> </u>	\$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	<b>5</b>	\$
	Partnership Interests		\$
	Other (Specify)		\$ 25,000.00
	Total	20,000,000.00	\$ 25,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		·
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases \$ 25,000.00
			\$ 0.00
	Non-accredited Investors	_	
	Total (for filings under Rule 504 only)		\$
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	n/a —————	\$_0.00
	Regulation A	n/a	<u>\$</u> 0.00
	Rule 504	n/a	\$_0.00
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$_15,000.00
	Legal Fees		\$ 10,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$_1,415.00
	Other Expenses (identify)		\$
	Total	<b>y</b>	\$ 26,415.00

e e	C OFFERING PRICE NUMBI	ERIOF INVESTORS, EXPENSES AND USE OF PR	OCEEDS?	
	b. Enter the difference between the aggregate offerin and total expenses furnished in response to Part C — Q proceeds to the issuer."	uestion 4.a. This difference is the "adjusted gross		19,973,585.00
i.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part 6	purpose is not known, furnish an estimate and he payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		] <b>\$</b>	
	Purchase of real estate	[	] \$	. <b>\_</b> \$
	Purchase, rental or leasing and installation of mach and equipment		<b></b> \$	
	Construction or leasing of plant buildings and facil	lities		s
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities of another	¬s	_
	Repayment of indebtedness			
	Working capital	[	<b></b> \$	_ 🗆 \$
	Other (specify): Purchase of investment securiti	es [	\$	\$ 25,000.00
	Column Totals		<b>∑</b> \$ 0.00	_ \$ 25,000.00
	Total Payments Listed (column totals added)		<b>Z</b> \$_2	5,000.00
W.		DEFEDERALISIGNATURE	4-14 V	
si	e issuer has duly caused this notice to be signed by the mature constitutes an undertaking by the issuer to fur- information furnished by the issuer to any non-acci-	undersigned duly authorized person. If this notice	e is filed under R ssion, upon writt	ule 505, the following
Īs	suer (Print or Type)	Signature	Date	
A	dvanced Equities iSkoot Investments I, LLC		May 29, 2008	
Ŋ	une of Signer (Print or Type)	Ti:le of Signer (Print or Type)		
Ar	nal Amin	Secretary of the Managing Member		

(2) Calculated based on the maximum aggregate offering amount.

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E STATE	SIGNATURE			并完全的		N. W.
1.	Is any party described in 17 CFR 230.262 pre provisions of such rule?	esently subject to	any of the disc	qualif:cati	on	Yes	No <b>⊠</b>	(3)
	See .	Appendix, Colun	nn 5, for state r	esponse.				
2.	The undersigned issuer hereby undertakes to full D (17 CFR 239.500) at such times as required		administrator (	of any stat	e in which this not	ice is filed a no	tice on l	Form
3.	The undersigned issuer hereby undertakes to issuer to offerees.	furnish to the sta	te administrato	ors, upon	written request, in	formation furn	ished b	y the
4.	The undersigned issuer represents that the iss limited Offering Exemption (ULOE) of the st of this exemption has the burden of establish	ate in which this	notice is filed a	nd unders	stands that the issu	be entitled to er claiming the	the Uni availa	iform bility
	er has read this notification and knows the conte thorized person.	ents to be true and	has duly caused	l this notic	ce to be signed on it	ts behalf by the	unders	igned
Issuer (	Print or Type)	Signature			Date			
Advanc	ed Equities iSkoot Investments I, LLC		1	/ '	May 29, 2	2008		
Name (	Print or Type)	Title (Print or	Type)					
Amal A	Amin	Secretary of t	he Managing N	lember				

(3) Not applicable for Rule 506 offerings.

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

<b>经</b>				AP	PENDIX			A STATE		
1	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL								o ord assert		
AK										
AZ										
AR										
CA										
СО										
CT		x	20,000,000	1	\$25,000.00	0	\$0.00		×	
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	NY STATE			APPI	ENDIX				MAN.
l	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MO	in your language.								
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1	Intend to sell to non-accredited investors in State (Part B-Item 1)  Type of security and aggregate offering price offered in state (Part C-Item 1)			. Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		-								
PR	<u>                                     </u>									

**END**